

**IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD**

510 EAST 12<sup>TH</sup>, SUITE 1A  
 DES MOINES, IA 50319  
 Fax: (515)281-4073  
 www.iowa.gov/ethics

Reset Form

**FORM-GB**

Gift or Bequest information received  
 by a department or accepted by the  
 Governor on behalf of the state

**For office use only**

Indexed \_\_\_\_\_  
 Audited \_\_\_\_\_  
 Checked \_\_\_\_\_  
 Computer \_\_\_\_\_

Iowa Code section 8.7 requires all gifts and bequests given to any department of the state of Iowa or received by the Governor on behalf of the state be reported to the Iowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

**DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:**

<b>Iowa Department of Public Defense - Military Division</b>	
Name of Department or Office 7105 NW 70th Ave.	Johnston, Iowa 50131
Mailing Address 515-252-4222	City, State, Zip Code
Area Code & Telephone No.	

**CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:**

Duane G. Jamison	
Name 7105 NW 70th Ave, Bldg 3535	Johnston, Iowa 50131
Mailing Address (if different from above) duane.jamison@iowa.gov	City, State, Zip (if different from above) 515-252-4222
Email Address	Area Code & Telephone Number (if different from above)

**DONOR OF GIFT OR BEQUEST:**

<b>KRHC Employees</b>	
Name	
Mailing Address	City, State, Zip Code
Area Code & Telephone Number	
Email Address (optional)	

11/18/2010	\$342.76
Date of Gift or Bequest	Amount/Value*
*value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".	

Provide a description of the gift or bequest and purpose thereof:

Cash gift for support of the Iowa National Guard Family Assistance Program

Criteria to use this form:

Receipt of any gift or bequest that is received by any department of the state or received by the Governor on behalf of the state.

**Statement of Affirmation:**

I, Duane G. Jamison affirm that the gift or bequest reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

Duane G. Jamison  
 Signature

1-06-11  
 Date

**IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD**

510 EAST 12<sup>TH</sup>, SUITE 1A  
 DES MOINES, IA 50319  
 Fax: (515)281-4073  
[www.iowa.gov/ethics](http://www.iowa.gov/ethics)

Reset Form

**FORM-GB**

Gift or Bequest information received  
 by a department or accepted by the  
 Governor on behalf of the state

**For office use only**

Indexed \_\_\_\_\_  
 Audited \_\_\_\_\_  
 Checked \_\_\_\_\_  
 Computer \_\_\_\_\_

Iowa Code section 8.7 requires all gifts and bequests given to any department of the state of Iowa or received by the Governor on behalf of the state be reported to the Iowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

**DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:**

<b>Iowa Department of Public Defense - Military Division</b>	
Name of Department or Office 7105 NW 70th Ave.	Johnston, Iowa 50131
Mailing Address 515-252-4222	City, State, Zip Code
Area Code & Telephone No.	

**CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:**

Duane G. Jamison	
Name 7105 NW 70th Ave, Bldg 3535	Johnston, Iowa 50131
Mailing Address (if different from above) duane.jamison@iowa.gov	City, State, Zip (if different from above) 515-252-4222
Email Address	Area Code & Telephone Number (if different from above)

**DONOR OF GIFT OR BEQUEST:**

Kaye D. And David A. Stoklasa	
Name 720 Staub Ct. NE	Cedar Rapids, IA 52402
Mailing Address	City, State, Zip Code
Area Code & Telephone Number	
Email Address (optional)	

11/28/10	\$ 600.00
Date of Gift or Bequest	Amount/Value*

\*value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".

Provide a description of the gift or bequest and purpose thereof:

Cash gift for support of the Iowa National Guard Family Assistance Program

Criteria to use this form:

Receipt of any gift or bequest that is received by any department of the state or received by the Governor on behalf of the state.

**Statement of Affirmation:**

I, Duane G. Jamison affirm that the gift or bequest reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

Duane G. Jamison  
 Signature

1-06-11  
 Date

**IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD**510 EAST 12<sup>TH</sup>, SUITE 1A

DES MOINES, IA 50319

Fax: (515)281-4073

www.iowa.gov/ethics

Reset Form

**FORM-GB**Gift or Bequest information received  
by a department or accepted by the  
Governor on behalf of the state**For office use only**

Indexed \_\_\_\_\_

Audited \_\_\_\_\_

Checked \_\_\_\_\_

Computer \_\_\_\_\_

2011 JAN 10 PM 1:36

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

Iowa Code section 8.7 requires all gifts and bequests given to any department of the state of Iowa or received by the Governor on behalf of the state be reported to the Iowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

**DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:****Iowa Department of Public Defense - Military Division**Name of Department or Office  
7105 NW 70th Ave.

Johnston, Iowa 50131

Mailing Address  
515-252-4222

City, State, Zip Code

Area Code &amp; Telephone No.

**CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:**

Duane G. Jamison

Name

7105 NW 70th Ave, Bldg 3535

Johnston, Iowa 50131

Mailing Address (if different from above)

City, State, Zip (if different from above)

duane.jamison@iowa.gov

515-252-4222

Email Address

Area Code &amp; Telephone Number (if different from above)

**DONOR OF GIFT OR BEQUEST:**

Constance Grignon

Name

3700 Aspen Dr.

W. Des Moines, IA 50265-3146

Mailing Address

City, State, Zip Code

Area Code &amp; Telephone Number

Email Address (optional)

12/14/2010

\$ 100.00

Date of Gift or Bequest

Amount/Value\*

\*value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".

Provide a description of the gift or bequest and purpose thereof:

Cash gift for support of the Iowa National Guard Family Assistance Program

Criteria to use this form:

Receipt of any gift or bequest that is received by any department of the state or received by the Governor on behalf of the state.

**Statement of Affirmation:**

I, Duane G. Jamison affirm that the gift or bequest reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

Signature

Date

1-06-11